

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NR		04/05/01
O.I.P.E. CLASSIFIER		59	591
FORMALITY REVIEW	MW	920	06-01-01
RESPONSE FORMALITY REVIEW	Em	927	08/22/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/20/02
2	✓	✓	12/20/02
3	✓	✓	12/20/02
4	✓	✓	12/20/02
5	✓	✓	12/20/02
6	✓	✓	12/20/02
7	✓	✓	12/20/02
8	✓	✓	12/20/02
9	✓	✓	12/20/02
10	✓	✓	12/20/02
11	✓	✓	12/20/02
12	✓	✓	12/20/02
13	✓	✓	12/20/02
14	✓	✓	12/20/02
15	✓	✓	12/20/02
16	✓	✓	12/20/02
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18	✓	✓	12/20/02
19	✓	✓	12/20/02
20	✓	✓	12/20/02
21	✓	✓	12/20/02
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23	✓	✓	12/20/02
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25	✓	✓	12/20/02
26	✓	✓	12/20/02
27	✓	✓	12/20/02
28	✓	✓	12/20/02
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If more than 150 claims or 10 actions  
 staple additional sheet here

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C-C  
 06-04-01  
 764  
 12/20/01